SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Wyden for Oregon		
Full Name (Last, First, Middle Initial) Kevin Cole Mailing Address 490 Turtle Bay Court SE		Date of Receipt 10 30 2015
Salem	State Zip Code OR 97306	Transaction ID : SA11AI.7177 Amount of Each Receipt this Period
- Control Committee.	ccupation	500.00
MAPS Credit Union CF	•	
Full Name (Last, First, Middle Initial) Confederated Tribes of Siletz Indians Mailing Address PO Box 549		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Siletz	State Zip Code OR 97380	Transaction ID : SA11AI.7136 Amount of Each Receipt this Period 5400.00
Tederal political committee.	ecupation	3400.00
Receipt For: Primary General Other (specify) ▼	ggregate Year-to-Date ▼ 5400.00	
Full Name (Last, First, Middle Initial) Robert Corwin Mailing Address 17363 Grandview Court		Date of Receipt 10 30 2015
,	State Zip Code OR 97034	Transaction ID : SA11AI.7183 Amount of Each Receipt this Period
rederal political committee.		500.00
First Technology Credit Union Ex	ecupation ecutive ggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		6400.00
TOTAL This Period (last page this line number only)		